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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/553,990	
	Filing Date	April 20, 2000	
	First Named Inventor	Youhao XU	
	Art Unit	1764	
	Examiner Name	J. Leung	
Total Number of Pages in This Submission	5	Attorney Docket Number	456962000200

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form (original + copy for fee processing (2 pages)) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) (1 page) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"><li>• Return Receipt Postcard</li></ul>
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	MORRISON & FOERSTER LLP (Customer No.: 25226)		
Signature	<i>Jill A. Jacobson</i>		
Printed name	Jill A. Jacobson		
Date	April 12, 2007	Reg. No.	40,030

I hereby certify that this paper is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV534441181US, on the date shown below in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: April 12, 2007

Signature: *Georgina Matos* (Georgina Matos)



<b>FEE TRANSMITTAL</b> <b>For FY 2007</b>  <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>Complete if Known</b>	
		Application Number	09/553,990
		Filing Date	April 20, 2000
		First Named Inventor	Youhao XU
		Examiner Name	J. Leung
		Art Unit	1764
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b>	1,520.00
		Attorney Docket No.	456962000200

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00
<b>2. EXCESS CLAIM FEES</b>							
							<b>Small Entity</b>
<b>Fee Description</b>							<b>Fee (\$)</b>
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
							180
<b>Total Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		
42 - 68 =		0	x 50.00 =	0.00			
HP = highest number of total claims paid for, if greater than 20.							
<b>Indep. Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Fee (\$)</b>		<b>Fee Paid (\$)</b>
3 - 6 =		0	x 200.00 =	0.00	360.00		0.00
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>		<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
- 100 =		/50	(round up to a whole number) x		250.00	0.00	
<b>4. OTHER FEE(S)</b>							
							<b>Fees Paid (\$)</b>
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1253 Extension for response within third month							1,020.00
1401 Notice of appeal							500.00

<b>SUBMITTED BY</b>			
Signature	<i>Jill A. Jacobson</i>	Registration No. (Attorney/Agent)	40,030
Name (Print/Type)	Jill A. Jacobson	Telephone	(650) 813-5876
		Date	April 12, 2007